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Fill in this information to identify your case:	
United States Bankruptcy Court for the:	
Northern District of Illinois	
Case number (# known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS FEB 17 2017

JEFFREY P. ALLSTEADT, CLERK

☐ Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together-called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct

	known). Answer every questio	ued, attach a separate sheet to this form. On the top of a n.	ny additional pages, write your maine and case har
? &	rt 1: Identify Yourself	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
l.	Your full name	7.533. 5330. 1.	ABOUT DEBICE 2 (Openior Striy in a contraction).
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	First name Middle name	First name Middle name
	Bring your picture identification to your meeting with the trustee.	Last name Suffix (Sr., Jr., II, III)	Last name Suffix (Sr., Jr., II, III)
inches	Ail other names you have used in the last 8 years Include your married or maiden names.	First name Last name First name	First name Last name First name
		Middle name Last name	Middle name Last name
T2001	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	$xxx - xx - \frac{7}{2} \frac{2}{2} \frac{1}{2}$ or $9xx - xx - \underline{\qquad}$	xxx - xx - <u>5</u> <u>7</u> <u>3</u> <u>3</u> <u>0</u> OR 9 xx - xx

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Debtor 1 Fig a Fred Middle N	Ordan Torres	Case number (if known)
ngelapitahan ngangan dipatisi dibadah manunan manunan tahun tahun merekahan salapapan berara me	ernomen av eneman vinna una vinna vinna manna una una una vinna vinna vinna vinna una vinna una vinna una una una vinna una vi	About Debtor 2 (Spouse Only in a Joint Case):
Any business names and Employer Identification Numbers (EIN) you have used in	I have not used any business names or EINs.	I have not used any business names or EINs.
the last 8 years	Business name	Business name
Include trade names and doing business as names	Business name	Business name
	EIN	EIN
	EIN	EIN
adable control of the following account of the		If Debtor 2 lives at a different address:
	241155 CCCC. Number Street	Number Street
	Channahon Ti GO410 City State ZIP Code	City State ZIP Cod
	County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	Number Street	Number Street
	P.O. Box	P.O. Box
	City State ZIP Code	City State ZIP Code
5. Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
	I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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ebtor 1 College Middle	lame	Last Name		Case number (# /	known)
Heather		rdala			
Tell the Court Ab	out Your E	lankruptcy Case			
The chapter of the Bankruptcy Code you		one. (For a brief description of each, cruptcy (Form 2010)). Also, go to the			1 U.S.C. § 342(b) for Individuals Filing he appropriate box.
are choosing to file under	☐ Cha	pter 7			
unuei	☐ Cha	pter 11			
	☐ Cha	pter 12			
	_	pter 13			
er transport er					antina tira tara tanggar ay ar marang ang mga ay ar ang
How you will pay the fee	loca you sub with	I court for more details about horself, you may pay with cash, ca mitting your payment on your be a pre-printed address.	ow you r ishier's o ehalf, yo	may pay. Typical check, or money ur attorney may	order. If your attorney is pay with a credit card or check
	App.	ed to pay the fee in installmer lication for Individuals to Pay Th	its . If yo ne <i>Filina</i>	ou choose this op Fee in Installme	otion, sign and attach the
	. 40%	roadon roi inamicado to r dy 17.	io i ming	. co m motamno	one (Chicai i Gilli 100) ().
	By la less pay	aw, a judge may, but is not requithan 150% of the official povert	ired to, by line the hoose the	waive your fee, a at applies to you his option, you m	tion only if you are filing for Chapter 7 and may do so only if your income is ir family size and you are unable to nust fill out the Application to Have the with your petition.
Have you filed for	☐ No				
bankruptcy within the last 8 years?	Yes.	District Nachherry IL.	When	MM / DD / YYYY	Case number 15-09895
		District	When		Case number
		District	When	MM / DD / YYYY	Construction
		District	vvnen	MM / DD / YYYY	Case number
Ara any bankruntov	X				
Are any bankruptcy cases pending or being	No No				
filed by a spouse who is not filing this case with	₩ Yes.	Debtor			Relationship to you
you, or by a business partner, or by an affiliate?		District	when	MM / DD / YYYY	Case number, if known
		Debtor			Relationship to you
		District	When		Case number, if known
				MM / DD / YYYY	
Do you rent your residence?	Yes.	Go to line 12. Has your landlord obtained an evic residence?	ction judg	ment against you	and do you want to stay in your
		No. Go to line 12.			
		Yes. Fill out <i>Initial Statement A</i> this bankruptcy petition.	bout an i	Eviction Judgment	Against You (Form 101A) and file it with

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ebtor 1 (Y) (Ch) (C) (Minister Na	o To	Lact News		Case numb	ber (# known)	www.w
Heather	Jerole	an-Torres				
art 3: Report About Any	Business	es You Own as a S	ole Propriet	or		
				<u> </u>		
. Are you a sole proprietor of any full- or part-time	N o. (Go to Part 4.				
business?	☐ Yes.	Name and location of b	ousiness			
A sole proprietorship is a business you operate as an						
individual, and is not a separate legal entity such as		Name of business, if any				
a corporation, partnership, or		Number Street	····	*		***************************************
LLC. If you have more than one						
sole proprietorship, use a separate sheet and attach it						A THE STREET OF
to this petition.		City		St	ate ZIP Code	
		Check the appropriate		*		
		Health Care Busine				
		Single Asset Real E	•	-	(01(51B))	
		Stockbroker (as defCommodity Broker				
		None of the above	(as deimed in	11 0.3.0. 9 10 1(0))	•	
	,, . ,		,.,.,			
Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	can set a most red any of th	e filing under Chapter 1 appropriate deadlines. It ent balance sheet, state lese documents do not d	f you indicate to ement of opera exist, follow the	hat you are a small itions, cash-flow sta	business debtor, you tement, and federal	u must attach your
For a definition of small	. 43	I am not filing under Ch				
business debtor, see 11 U.S.C. § 101(51D).		I am filing under Chapte the Bankruptcy Code.	er 11, but I am	NOT a small busine	ess debtor according	to the definition in
	☐ Yes.	I am filing under Chapte Bankruptcy Code.	er 11 and I am	a small business de	ebtor according to the	e definition in the
Report if You Own	or Have	Any Hazardous Proj	perty or Any	Property That I	Needs Immediate	Attention
Do you own or have any	No.					
property that poses or is		What is the hazard?				
alleged to pose a threat of imminent and identifiable hazard to public health or safety?	⊶ res.	what is the hazard?				
Or do you own any property that needs						
immediate attention?		If immediate attention	is needed, why	y is it needed?		
For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?						
		Where is the property?	? Number	Street		THE
			IAGITIOGI	Ander		
			***************************************	***************************************		
			City		84-7	7/0 0-1-
			City		State	ZIP Code

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Debtor 1	(X)+C
500101	Circl Man

Mich	nel O	Torres	
First Name	Middle Name	Lasi Name	
recat	tuer- Jo	ordan-Tou	705

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about
credit counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

-received a briefing from an approved credit counseling agency within the 180 days before ! filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

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credit counseling because of:	-

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or

through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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De	btor 1 First Name Middle Nam	tast Name Octdan - Torre	Case number (# kmc)Wn)
	Heather J	ordan-torre	5	
P	art 6: Answer These Que	stions for Reporting Purpos	ses	
16.	What kind of debts do you have?	16a. Are your debts prima as "incurred by an individu	rily consumer debts? Consumer deb al primarily for a personal, family, or hous	ts are defined in 11 U.S.C. § 101(8) sehold purpose."
	you have:	No. Go to line 16b. Yes. Go to line 17.		
			rily business debts? Business debts westment or through the operation of the	
		No. Go to line 16c. Yes. Go to line 17.	-	
			owe that are not consumer debts or bus	siness debts.
47	Are you filing under			TO POTEST TO THE TOTAL TO THE STATE OF THE S
17,	Chapter 7?	No. I am not filing under Ch		
	Do you estimate that after any exempt property is	Yes. I am filing under Chapte administrative expense	er 7. Do you estimate that after any exemes are paid that funds will be available to	npt property is excluded and distribute to unsecured creditors?
	excluded and administrative expenses	□ No		
	are paid that funds will be available for distribution to unsecured creditors?	☐ Yes		
18.	How many creditors do	1-49		25,001-50,000
	you estimate that you owe?	□ 50-99 □ 100-199	5,001-10,000 10,001-25,000	50,001-100,000 More than 100,000
ayes ea éi	ret Ser Verticon (Series de Verticon) de la constitución de la constit	200-999	et antikan latan 1970 (1988). Was berkatak bandara nakabuk wan wasik masabansaya pangan mangan banda 1984 sa b	
19.	How much do you	\$0-\$50,000	\$1,000,001-\$10 million	☐ \$500,000,001-\$1 billion
	estimate your assets to be worth?	\$50,001-\$100,000 \$100,001-\$500,000	\$10,000,001-\$50 million \$50,000,001-\$100 million	\$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion
		\$500,001-\$300,000	\$100,000,001-\$500 million	☐ More than \$50 billion
20.	How much do you	\$0-\$50,000	☐ \$1,000,001-\$10 million	□ \$500,000,001-\$1 billion
	estimate your liabilities	\$50,001-\$100,000	☐ \$10,000,001-\$50 million	☐ \$1,000,000,001-\$10 billion
	to be?	\$100,001-\$500,000	\$50,000,001-\$100 million	☐ \$10,000,000,001-\$50 billion
Pa	rt 74 Sign Below	☐ \$500,001-\$1 million	☐ \$100,000,001-\$500 million	More than \$50 billion
Fo	r you	I have examined this petition, an correct.	nd I declare under penalty of perjury that	the information provided is true and
			apter 7, I am aware that I may proceed, i understand the relief available under ead	
			d I did not pay or agree to pay someone vand read the notice required by 11 U.S.C.	
		I request relief in accordance will	th the chapter of title 11, United States C	ode, specified in this petition.
			alt in fines up to \$250,000, or imprisonmen	money or property by fraud in connection nt for up to 20 years, or both.
		* Medualt	x Aca	the foodaw-long
		Signature of Debtor 1	19	of Debtor(2)
		Executed on Od 17	<u>dO</u> / Executed	ou O of (1) of (1)

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Debtor 1 Michael Y First Name Middle N Heather	Torres Last Name Last Name Jordan - Torres Case number (# known)
For you if you are filing this bankruptcy without an attorney	The law allows you, as an individual, to represent yourself in bankruptcy court, but you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.
If you are represented by an attorney, you do not need to file this page.	To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.
	You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. Bankruptcy fraud is a serious crime; you could be fined and imprisoned.
	If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.
	Are you aware that filing for bankruptcy is a serious action with long-term financial and legal consequences?
	□ No
	Are you aware that bankruptcy fraud is a serious crime and that if your bankruptcy forms are inaccurate or incomplete, you could be fined or imprisoned?
	□ No
	Yes
	Did you pay or agree to pay someone who is not an attorney to help you fill out your bankruptcy forms? No Yes. Name of Person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
	By signing here, I acknowledge that I understand the risks involved in filing without an attorney. I have read and understood this notice, and I am aware that filing a bankruptcy case without an attorney may cause me to lose my rights or property if I do not properly handle the case.
	Signature of Debtor 1 Signature of Debtor 2 Date Oal 17/2017
	Contact phone (85) 828-5516 Contact phone (815) 483 4825
	Cell phone (815) 278-1792 Cell phone (815) 483-9825

Email address _

Email address

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

In Re:)	
Debtor(s) Michael D. Torres)	Case No. Chapter 3
Heather Jordan - Torros)	

List of Creditors

Department of education 400 maryland Avenue, 5W Washington, DC - 20202	Amount: 11549.96 (wife) Heather broam-Torres
Com cast P.O. Dox 3001 South eastern PA 19398 ACCT: 8771200230325009	(Wife) Heather Jordan - Torres
Capital one Po Box 6492 Carol Stream IL 40197 Acctor 0132	AMT. 500.00 (Wife) Heather Jordan-Torres
Capulatione PO BOX BY92 Carol Stream IL 40197 ACCT. 1941	AMT. 462.07 (Husband Imichaelo Torres
Capital one POBOX 4492 Carol Stream IL LO1970132 + 1603	Amt. 724.28 (Joint) Heather Lynn Jordan Forms (Asshord) michael D Torres

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Debtor 1

Michael Torres & Heather Jordan-Tones

Credit One Po Box 98873 Las Vegas NV 89193	Amt. 500.00
Acct. 3829	(W) Fe) Heather Jordan-Torres
Creditions PO BOX 98873 L95 Veg95 NV 89193	AMT. 724.28
Acct.	Husband michaelotories
COMED. Ro. Box GIII	AMT. 500.00
Carol Stream IL 60197 Acct. 9860114/37	(hlus band) michael o Torres
DAVID & LANIA Stafford POBOX 152 Atty: Charles L Schmidt Commorka 115 W. Washington Street	4091.00
1,101,12,15, do.120	(Joint) Heather Jordan-Torres
chase Banki checking account	AMT. 400.00
ACCT: 718589190	(Join +) michael to Torres
Village of Minooka 121 E. McEvilly Road Minooka IL GOLLY	amount- 253.43
Acct.0103000017-04	HUJband michael otorgs
Vertzono P.O. Box 4002 Acworth, GA 30101	AMIT. 886.81
	(wife) Heather Sordan-Tornes
PLS 211 S. CARKIN AVE JOLIET IL 60436	AMT. 1983.00
ACCT: CL 2540683	(HUSBAND) MICHALEL D. TORRES

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Fill in th	nis information to identify your case and thi	s filing:		
Debtor 1	MICHAEL DOMINIC	TOWNES		
Debtor 2 (Spouse, it	HEATHER (NAIN	Last Name JONO AL TORRE Last Name		
United St	iates Bankruptcy Court for the: Northern District of	Minois		
Case nur	nber			7
			Ĺ	Check if this is an amended filing
Offic	ial Form 106A/B			ū
		VB. 57		
	nedule A/B: Propert			12/15
categor respon:	y where you think it fits best. Be as comple sible for supplying correct information. If m our name and case number (if known). Answ	s. List an asset only once. If an asset fits in more ete and accurate as possible. If two married peopl ore space is needed, attach a separate sheet to the ver every question. Land, or Other Real Estate You Own or Ha	e are filing together, be is form. On the top of	oth are equally
1. Do y o	ou own or have any legal or equitable intere	st in any residence, building, land, or similar prop	erty?	
~_	o. Go to Part 2.			
Ŭ Y₁	es. Where is the property?	What is the property? Check all that apply.		
4.4		☐ Single-family home	Do not deduct secured cl the amount of any secure	ed claims on Schedule D:
1.1.	Street address, if available, or other description	Duplex or multi-unit building Condominium or cooperative	Creditors Who Have Clair	
		Manufactured or mobile home	Current value of the entire property?	Current value of the portion you own?
		☐ Land	\$	\$
		 ☐ Investment property ☐ Timeshare 	Describe the nature of	of your ownership
	City State ZIP Code	Other	interest (such as fee the entireties, or a life	simple, tenancy by
		Who has an interest in the property? Check one.	,	
		Debtor 1 only	A-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	\$\tag{\text{\$\}\$}}}}\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\ti
	County	Debtor 2 only Debtor 1 and Debtor 2 only	Check if this is co	mmunity property
	•	At least one of the debtors and another	(see instructions)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
		Other information you wish to add about this it		
lf vou	own or have more than one, list here:	property identification number:	· · · · · · · · · · · · · · · · · · ·	
•		What is the property? Check all that apply.	Do not deduct secured cla	sime or everyntions. But
1.2.		Single-family home	the amount of any secure Creditors Who Have Clain	d claims on Schedule D:
,	Street address, if available, or other description	Duplex or multi-unit building Condominium or cooperative		
		Manufactured or mobile home	Current value of the entire property?	Current value of the portion you own?
		Land	\$	\$
		Investment property Timeshare	Describe the nature of	f vour ownership
	City State ZIP Code	Other	interest (such as fee : the entireties, or a life	simple, tenancy by
		Who has an interest in the property? Check one.	vvv., vi a lit	
		Debtor 1 only		
	County	Debtor 2 only	0	
		Debtor 1 and Debtor 2 only At least one of the debtors and another	Check if this is con (see instructions)	mmunity property
			,	
		Other information you wish to add about this iter property identification number:	n, such as local	

Debtor	HEASTINGO () Solo	Filed 02/17/17 Entered 02/17/17 Document Page 11 of 52 Case number (i		c Main
	First Name Last Name Last Name	e	4	
1.3	3.	What is the property? Check all that apply. Single-family home	the amount of any secur	laims or exemptions. Put ed claims on Schedule D: ims Secured by Property.
	Street address, if available, or other description	Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	Current value of the entire property?	
		Land Investment property	\$	\$
	City State ZIP Code		Describe the nature interest (such as fee the entireties, or a li	simple, tenancy by
		Who has an interest in the property? Check one.		
	County	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Check if this is co	ommunity property
		At least one of the debtors and another Other information you wish to add about this it property identification number:	em, such as local	
Part 2: Do you you own	Describe Your Vehicles own, lease, or have legal or equitable intere	st in any vehicles, whether they are registered or le, also report it on Schedule G: Executory Contracts s, motorcycles	not? Include any vehicle	S
	to 'es	-		
3.1.	Make: Model: Year: Approximate mileage: Other information:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Do not deduct secured class the amount of any secure Creditors Who Have Claim Current value of the entire property?	d claims on Schedule D: ns Secured by Property.
		☐ Check if this is community property (see instructions)	\$	\$
If you	own or have more than one, describe here:			
3.2.	Make:	Who has an interest in the property? Check one.	Do not deduct secured cla	
	Model:	Debtor 1 only Debtor 2 only	the amount of any secured Creditors Who Have Claim	
	Year: Approximate mileage:	Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?

Approximate mileage:

Other information:

instructions)

lacksquare At least one of the debtors and another

☐ Check if this is community property (see

Page 12 of 52 NGSTNER LYNN Debtor 1 Case number (# known) Who has an interest in the property? Check one. 3.3. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year Debtor 1 and Debtor 2 only Current value of the Current value of the entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: Check if this is community property (see instructions) Who has an interest in the property? Check one. Make: 34 Do not deduct secured claims or exemptions. Put Debtor 1 only the amount of any secured claims on Schedule D: Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Debtor 1 and Debtor 2 only Current value of the Approximate mileage: entire property? portion you own? At least one of the debtors and another Other information: ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories No Yes Who has an interest in the property? Check one. 4.1. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Other information: At least one of the debtors and another entire property? portion you own? ☐ Check if this is community property (see instructions) If you own or have more than one, list here: Who has an interest in the property? Check one. 4.2. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only Other information: entire property? portion you own? At least one of the debtors and another ☐ Check if this is community property (see instructions) 5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here

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Debtor 1

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8:	_		ж.	ш
41.		ш.	ж.	-

Describe Your Personal and Household Items

Do	you own or have any le	egal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6.	Household goods and	furnishings	•
	Examples: Major appliar	nces, furniture, linens, china, kitchenware	
	☐ No	issal Darati	
	Yes. Describe	used furniture	\$ 150.00
7.	Electronics	Non-control of the control of the co	
	Examples: Televisions a collections: e	and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music electronic devices including cell phones, cameras, media players, games	
	□ No	indutation devices including our priories, cultivide, intedite players, gaines	
		3 Flat Screen TV	\$ 200.00
8.	Collectibles of value		
	stamp, coin, o	figurines; paintings, prints, or other artwork; books, pictures, or other art objects; or baseball card collections; other collections, memorabilia, collectibles	
	No Yes. Describe		_
			\$
9.	Equipment for sports as	nd hobbies	•
	and kayaks; o	ographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes carpentry tools; musical instruments	
	No No		1 1
	Yes. Describe		\$
10.	Firearms		
•	📜 No .	shotguns, ammunition, and related equipment	
•	Yes. Describe		\$
11.4	Clothes) \
		hes, furs, leather coats, designer wear, shoes, accessories	1
	No Sescribe	used clothing	,500,00
	100. 6000116011111111	4.264 - 1.21 - 1.30	\$ 900.00
12.	Jewelry		
	Examples: Everyday jewe gold, silver	elry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,	
	② No		
	Yes. Describe		\$
	Non-farm animals <i>Examples:</i> Dogs, cats, bir	uda banasa	
		ras, norses	
	Yes. Describe	POMERANIAN 13 yn. MALK	\$
4.		household items you did not already list, including any health aids you did not list	
)	No		
-(Yes. Give specific information.		\$
5. /	Add the dollar value of a	all of your entries from Part 3, including any entries for pages you have attached	\$ 850·00
f	or Part 3. Write that nur	mber here	* 10.00

Jordan-Torres **Describe Your Financial Assets** Part 4: Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ No Yes..... Cash: 50.00 \$ 50.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. No No ☐ Yes..... Institution name: 17.1. Checking account: 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts Mo No ☐ Yes..... Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No No % of ownership: Yes, Give specific 0% % information about 0% them..... 0%

Doc 1

Debtor 1

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Fir	ine Middle Name Last Name	
	ather Jordan-Torres	
20. Government	ed corporate bonds and other negotiable and non-negotiable instruments	
Negotiable in Non-negotiat	uments include personal checks, cashiers' checks, promissory notes, and money orders. instruments are those you cannot transfer to someone by signing or delivering them.	
M No	restations are those you cannot transfer to someone by signing or delivering them.	
Yes. Give	ecific Issuer name:	
informatio them		\$
		\$
		\$
21 Retirement o	ension accounts	
	ests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans	
₩ No		
Yes, List e account s	rh arately. Type of account: Institution name:	
	401(k) or similar plan:	s
	Pension plan:	\$
	IRA:	
	Retirement account:	\$
	Keogh:	\$
	Additional account:	,
	6 44/4:	
	Additional account:	3
22. Security deno	is and prepayments	
Your share of	unused deposits you have made so that you may continue service or use from a company ments with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications	
■ No		
☐ Yes	Institution name or individual:	
	Electric:	s
	Gas:	\$
	Heating oil:	s
	Security deposit on rental unit:	\$
	Prepaid rent:	s
	Telephone: Water:	\$
	Rented furniture:	\$
	Other:	\$
		\$
23. Annuities (A c	rract for a periodic payment of money to you, either for life or for a number of years)	
₽ No		
☐ Yes	Issuer name and description:	<u> </u>
		\$
		\$
		a

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Debtor 1	First Name Middle Name	Jordan - Tarca	Case number (# known)	
		account in a qualified ABLE program,	or under a qualified state tuition program	n.
No Ves				
	institut	ion name and description. Separately file	e the records of any interests.11 U,S,C, § 52	(11(c):
				\$
	***************************************	4-4-4		_ \$ <u> </u>
25. Trusts, e exercisal	quitable or future interests ble for your benefit	in property (other than anything listed	in line 1), and rights or powers	
No D	Give specific			
	nation about them			\$
Examples	copyrights, trademarks, tra c: Internet domain names, wel	de secrets, and other intellectual proposites, proceeds from royalties and licen	perty sing agreements	
■ No □ Yes (Give specific			
	nation about them			\$
	, franchises, and other general Building permits, exclusive I	eral intangibles icenses, cooperative association holding	gs, liquor licenses, professional licenses	
No No				
☐ Yes. 0 inform	Give specific ation about them			\$
Money or pro	operty owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
	ds owed to you			
	Sive specific information	2010 to D 1	Federal:	• 1000
y	bout them, including whether ou already filed the returns nd the tax years	to be 10' la 1	State: Local:	\$ 100 \$ 7000
29. Family su Examples:		ny, spousal support, child support, maint	enance, divorce settlement, property settlen	nent
No	live specific information			
La res, G	ive specific information		Alimony:	\$
		:	Maintenance: Support:	\$
			Divorce settlement: Property settlement:	\$ \$
0. Other amo Examples:	ounts someone owes you Unpaid wages, disability insu Social Security benefits; unp	rrance payments, disability benefits, sick aid loans you made to someone else	pay, vacation pay, workers' compensation,	
a No				
	ive specific information			<u>\$</u>
		· · · · · · · · · · · · · · · · · · ·		

29.

30.

Debtor 1	Case 17-04629 Do	Document	Entered 02/17/17 11:44:35 Page 17 of 52 Case number (if known)	
	neather Jo	ordan - Torre	0	
	s in insurance policies es: Health, disability, or life insuran	ce; health savings account (HS	A); credit, homeowner's, or renter's insurance	
	Name the insurance company	Company name:	Denofician	Commander on out or to object
	of each policy and list its value	Company Herric.	Beneficiary:	Surrender or refund value:
				\$
				\$
32 Any inte	rest in property that is due you	from company who has died		•
If you are property	e the beneficiary of a living trust, endecause someone has died.	spect proceeds from a life insur	ance policy, or are currently entitled to receive	
® No				
☐ Yes.	Give specific information			s O
Example	against third parties, whether or s: Accidents, employment disputes	not you have filed a lawsuit o	or made a demand for payment sue	records and
No No				
∟i Yes.	Describe each claim			s ()
34. Other co to set of	ntingent and unliquidated claim		ounterclaims of the debtor and rights	
	Describe each claim.			
				\$
35. Any finar	ncial assets you did not already			
No No				
☐ Yes.	Give specific information	et sellen sala sala sala sala sala sala sala sal		\$
36. Add the 6 for Part 4	dollar value of all of your entries I. Write that number here	from Part 4, including any er	ntries for pages you have attached	,7000
Part 5:	Describe Any Business-R	elated Property You O	wn or Have an Interest in. List any	real estate in Part 1.
	wn or have any legal or equitable	e interest in any business-rel	ated property?	
	o to Part 6. So to line 38.			
165.	SO TO TIME SIG.			Current value of the portion you own? Do not deduct secured claims
38. Accounts	receivable or commissions you	aiready earned		or exemptions.
☐ No	-	-		
	Describe			
20 Of Fice co				\$
	uipment, furnishings, and suppli Business-related computers, software, i		nines, rugs, telephones, desks, chairs, electronic device	es
☐ No				
Yes. □	Pescribe			\$
	Annual de la martina de la compania		1, T T 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	

39.

Debtor 1	Case 17-04629	Doc 1 Filed 02/17/ Document		Desc Main
	First Name Middle Name	Last Name		
		300000000000000000000000000000000000000		
	ry, fixtures, equipment,	supplies you use in business, an	d tools of your trade	
■ No				
Yes.	Describe			s
	5	ann a fan i territori er er er ann den de fall fall dag i territori er de er fall d		14 Aunt 111 111 1111 11
41. Inventory	1			
■ No	Describe	ark keleta dan dan anaman menangangke pilanta akariman minipangkepangan pilanta anakan kelana menan menan meng		
- 163,1	Describe			\$
40 Intercets	lm mm.d			
42. Interests	in partnerships or joint	ventures		
	Describe Name of en			_
	Name of en	•	% of ownership	o: ()
	CARLAM MILES CONTROL OF THE PARTY OF THE PAR			\$
			% %	•
	the state of the s		76	Ψ
43. Customei No	lists, mailing lists, or o	ther compilations		
)o vour lists include ner	sonally identifiable information /	as defined in 11 U.S.C. § 101(41A))?	
	☐ No			
	Yes, Describe			8
	•			\$
44 Any husir	ess-related property yo			<u>!</u>
a No	rous rolated property yo	a did not an eady list		
	Give specific			
intorm	ation			3
				\$
				\$
				\$
				\$
	+			\$
45. Add the d	ollar value of all of your	entries from Part 5, including an	y entries for pages you have attached	(*)
for Part 5.	Write that number here		-	•
Part 6: D	escribe Any Farm- a	nd Commercial Fishing Polat	ed Property You Own or Have an Interest	
If	you own or have an inte	erest in farmland, list it in Part 1.	es Property for Own of Have an interest	in.
46. Do you ow No. Go	n or have any legal or e	quitable interest in any farm- or o	commercial fishing-related property?	
	to Part 7. to line 47.			
				Current value of the
				portion you own?
				Do not deduct secured claims or exemptions.
47. Farm anim				от олотирионь.
	Livestock, poultry, farm-ra	aised fish		
☐ No ☐ Yes	·	tanan pagangan pagan pagan akan akan ang akan pagan pagan ang ang ang ang ang ang ang ang ang		
→ res				
		e lakaran sarata mengalak ada a se aratam atam mammal ye ya asam atam mamara ye ya a		\$

		Decument Dags 10 of C2	esc Main
Debtor 1	M \ Ch	Middle Name Last Name	
		tur Jordan-Torres	
8. Crops— 2 No	either growin	g or harvested	
Yes	. Give specific		\$
	nd fishing equ	pment, implements, machinery, fixtures, and tools of trade	
No Yes			\mathcal{O}
			\$
io. Farm ar	nd fishing sup	plies, chemicals, and feed	
S No □ Ves			4
			\$
51. Any fari	m- and comm	ercial fishing-related property you did not already list	
No No Ves	. Give specific		\widehat{C}
	mation		\$
52. Add the	dollar value	of all of your entries from Part 6, including any entries for pages you have attached	s
for Part	t 6. Write that	number here	
		The Alexander of the Al	
Part 7:	Describe .	All Property You Own or Have an Interest in That You Did Not List Above	
53. Do you	have other pr	operty of any kind you did not already list? , country club membership	
B No	a. Oddoon dakok		
	. Give specific		\$ (2)
			\$
			s (?)
54. Add the	e dollar value (of all of your entries from Part 7. Write that number here	
	l		
Part 8:	List the T	otals of Each Part of this Form	
55. Part 1:	Total real esta	te, line 2→	\$
56. Part 2:	Total vehicles	, line 5	
57. Part 3:	Total persona	l and household items, line 15	
58. Part 4:	Total financia	assets, line 36 \$ \(^{\infty} \)	
59. Part 5 :	Total busines	s-related property, line 45	
60. Part 6 :	Total farm- an	d fishing-related property, line 52	
61. Part 7:	Total other pr	operty not listed, line 54 +\$	
		rty. Add lines 56 through 61	+\$7850.00
ve. rusas p	cracial brobe		
63. Total o	f all property o	on Schedule A/B. Add line 55 + line 62	\$ 7850.00

Case 17-04629 Doc 1 Filed 02/17/17 Entered 02/17/17 11:44:35 Desc Main Fill in this information to identify your case: Debtor 1 Debtor 2 (Spouse, if filing) United States Bankruptcy Court for the: Northern District of Illinois Case number Check if this is an amended filing Official Form 106C Schedule C: The Property You Claim as Exempt 04/16 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known). For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount. **Identify the Property You Claim as Exempt** Part 1: 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below. Brief description of the property and line on Amount of the exemption you claim Specific laws that allow exemption Current value of the Schedule A/B that lists this property portion you own Check only one box for each exemption. Copy the value from Schedule A/B Brief description: 100% of fair market value, up to Line from any applicable statutory limit Schedule A/B: Brief **\$** description: a 100% of fair market value, up to Line from any applicable statutory limit Schedule A/B: Brief **\$** description: a 100% of fair market value, up to Line from any applicable statutory limit Schedule A/B: 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes, Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No 翻 Yes

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Dehtor	1

			Case number (if known)
First Name	Middle Name	Last Name	

Part 2:

Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description:	\$	Q \$	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	\$ \$ 100% of fair market value, up to	
Line from Schedule A/B:		any applicable statutory limit	
Brief description:	\$	□ \$	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	\$	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$		
Line from Schedule A/B: ———		☐ 100% of fair market value, up to any applicable statutory limit	TO A THE PERSONAL PROCESSING AND A PROCESSING AND A SECOND ASSECTION ASSECTIO
Brief description:	\$	Q \$	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	<u> </u>	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	S	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	Q \$	
Line from Schedule A/B:		100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	S	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	\$ \$ to 0.00% of fair market value, up to	
Line from Schedule A/B: ———		any applicable statutory limit	
Brief description:	\$	_ s	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	

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Debtor 1 MCUAC DOM First Name Middle Debtor 2 MCUAC CAN (Spouse, if filing) First Name Middle United States Bankruptcy Court for the: Northern Case number (If known) Official Form 106D	Name Last Name LONG TONG S LAST NAME LAST NAME LAST NAME		Check amende		
	s Who Have Claims Secur	ed hv Pror	ertv	12/15	
Be as complete and accurate as possible information. If more space is needed, cop additional pages, write your name and ca	If two married people are filing together, both are ed by the Additional Page, fill it out, number the entries, se number (if known). By your property? In to the court with your other schedules. You have nothing	ually responsible for and attach it to this	or supplying correc form. On the top of	t	
Part 1: List All Secured Claims					
for each claim. If more than one creditor t	nore than one secured claim, list the creditor separately has a particular claim, list the other creditors in Part 2. habetical order according to the creditor's name.	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any	
2.1	Describe the property that secures the claim:	\$	\$	\$	
Creditor's Name]			
Number Street City State ZIP Code	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply,				
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt	An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)	-			
Date debt was incurred	Last 4 digits of account number				
2.2	Describe the property that secures the claim:	\$	\$		
Creditor's Name Number Street	As of the date you file, the claim is: Check all that apply. Contingent				
	☐ Unliquidated				
City State ZIP Code	☐ Disputed				
Who owes the debt? Check one. Debtor 1 only	Nature of lien. Check all that apply.				
Debtor 2 only	An agreement you made (such as mortgage or secured car loan)				
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)				
	At least one of the debtors and another Judgment lien from a lawsuit Other (including a right to offset)				
Check if this claim relates to a community debt Date debt was incurred	Last 4 digits of account number			:	
мын электерия байын байын байын байын байын тайын байын б Сооруу байынын байын	Column A on this page. Write that number here:	estres templospolitymene och met voluntarannepublikarnantari ventre († 1	ke novem entirelise en eventeen ken ilmon entrembet werken konstantiel steritiske is	entenni trattinen en	

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Debtor 1 Case number (if known) First Name **Additional Page** Column A Column B Column C Amount of claim Part 1: Value of collateral Unsecured After listing any entries on this page, number them beginning with 2.3, followed Do not deduct the that supports this portion by 2.4, and so forth. claim value of collateral. If any Describe the property that secures the claim: Creditor's Name Number Street As of the date you file, the claim is: Check all that apply. Contingent City ZIP Code Unliquidated Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured Debtor 2 only Debtor 1 and Debtor 2 only Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another Judgment lien from a lawsuit Other (including a right to offset) ☐ Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number Describe the property that secures the claim: Creditor's Name Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated ZIP Code Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured) Debtor 2 only car loan) Debtor 1 and Debtor 2 only ☐ Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another Judgment lien from a lawsuit Other (including a right to offset) Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number Describe the property that secures the claim: Creditor's Name Number Street As of the date you file, the claim is: Check all that apply. Contingent City ZIP Code Unliquidated Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured) Debtor 2 only car loan) ☐ Statutory lien (such as tax lien, mechanic's lien) Debtor 1 and Debtor 2 only At least one of the debtors and another Judgment lien from a lawsuit Other (including a right to offset) Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number Add the dollar value of your entries in Column A on this page. Write that number here:

Write that number here:

page ____ of _

If this is the last page of your form, add the dollar value totals from all pages.

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HEAT HER VINN JOHNAN TURNES

Case number (# known)

Debtor 1

you have	s trying to collect from you	for a debt you owe to any of the debts that	someone else, list t l you listed in Part 1.	r a debt that you already listed in Part 1. For example, if a collection he creditor in Part 1, and then list the collection agency here. Similarly, if list the additional creditors here. If you do not have additional persons to
				On which line in Part 1 did you enter the creditor?
Name	1	***************************************	And the second s	Last 4 digits of account number
Numb	er Street			
				_
City		State	ZIP Code	
		in the material and an area of the second and area of the second and area of the second and area of the second	terrores e en e	On which line in Part 1 did you enter the creditor?
Name				Last 4 digits of account number
Numb	er Street	######################################		
-00-00-00-00-00-00-00-00-00-00-00-00-00		The second secon	The state of the s	
City	****	State	ZIP Code	-
				On which line in Part 1 did you enter the creditor?
Name				Last 4 digits of account number
Numbe	er Street			
				_
City		State	ZIP Code	
		,	en te tre en 8 emerciajorim, in termo y en	On which line in Part 1 did you enter the creditor?
Name				Last 4 digits of account number
Numbe	r Street			-
		·····		-
City		State	ZIP Code	-
		erene en er	entre ne trace esperado do como en entre de como	On which line in Part 1 did you enter the creditor?
Name				Last 4 digits of account number
Numbe	r Street			-
······································		***************************************		
City		State	ZIP Code	
	to the second group of		e de la companya de l	On which line in Part 1 did you enter the creditor?
Name		V 100 100 100 100 100 100 100 100 100 10		Last 4 digits of account number
Numbe	Street			

City		State	ZIP Code	

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Priority Creditor's Name When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Unliquidated Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No No When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Other. Specify		Document Page 25 of 52		
Deltar 2 (Scores Reg) Froziles	Fill in this information to identify your case:			
Debit 2	Debtor 1 MICHAGE DOMINIC	Tonces		
Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible, Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule AB: Property (Official Form 106AB) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106AB) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106AB) and on Schedule G: Executory Contracts and Unexpired Lease (Official Form 106AB) and on Schedule G: Executory Contracts and Unexpired Lease (Official Form 106AB) and on Schedule G: Executory Contracts and Unexpired Lease (Official Form 106AB) and on Schedule G: Executory Contracts and Unexpired Lease (Official Form 106AB) and on Schedule G: Executory Contracts and Unexpired Lease (Official Form 106AB) and on Schedule G: Executory Contracts and Unexpired Lease (Official Form 106AB) and on Schedule G: Executory Contracts and Unexpired Lease (Official Form 106AB) and on Schedule G: Executory Contracts and Unexpired Lease (Official Form 106ABB) and on Schedule G: Executory Contracts and Unexpired Lease (Official Form 106ABB) and Official Form 106ABB and Offic	Debtor 2 MENTHER CAN	JONDAN TONO F		
Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unspired leases that could result in a claim. Also list executory contracts and suspense desease (Ordinal Form 106AB) and on Schedule G: Executory Contracts and Inserperide Leases (Ordinal Form 106AB) and on Schedule G: Executory Contracts and Inserperide Leases (Ordinal Form 106AB) and on Schedule G: Executory Contracts and Inserperide Leases (Ordinal Form 106AB) and on Schedule G: Executory Contracts and Inserperide Leases (Ordinal Form 106AB) and on Schedule G: Executory Contracts and Inserperide Leases (Ordinal Form 106AB) and on Schedule G: Executory Contracts and Inserperide Lease (Ordinal Form 106AB) and on Schedule G: Executory Contracts and Inserperide Lease (Ordinal Form 106ABB) and on Schedule G: Executory Contracts and Inserperide Lease (Ordinal Form 106ABB) and on Schedule G: Executory Contracts and Inserperide Lease (Ordinal Form 106ABBB) and on Schedule G: Executory Contracts and Inserperide Lease (Ordinal Form 106ABBB) and on Schedule G: Executory Contracts and Insert Co	United States Bankruptcy Court for the: Northern District	t of Illinois		
Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. It is the other party to any executivy contracts or unexpired leases that could result in a claim. Also list executiory contracts or unexpired leases and unexpired Leases (Official Form 106A/B) and on Schedule 6: Executory Contracts and Unexpired Leases (Official Form 106A). Do not include any service of the Party vour neaf (if it out, number the entries in the Conditions With New Claims Secured by Propary) if miles of the Party vour neaf (if it out, number the entries in the Conditions With New Claims Secured by Propary) in miles against you? No. Go to Part 2. It is all of your priority unsecured claims against you? No. Go to Part 2. It is a claim has both priority and nonproprily amounts, list that claim here and show both priority and nonproprily amounts, As much a possible, list the claims highlighted-in order according to the creditor and show both priority and nonproprily amounts, As much a possible, list the claims highlighted-in order according to the creditor and show both priority and nonproprily amounts, As much as possible, list the claims highlighted-in order according to the creditor and show both priority and nonproprily amounts, As much as possible, list the claims highlighted-in order according to the creditor and show both priority and nonproprily amounts, As much as possible, list the claims highlighted in order according to the creditor and show both priority and nonproprily amounts, As much as possible, list the claims is diphetical order according to the creditor and show both priority and nonproprily amounts. It is the claim is the claim is the claim is the certain that claim have been than the instruction booklet. Total claim				Check if this is an
Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule ARS: Property Cithtain Form 166AD) and on Schedule Sc				amended filing
Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the offer party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Contracts	Official Form 106E/F			
List the offer party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts and threetyfed Leases (Official Form 1656). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors With Dave Claims Secured by Property. If more space is received, copy the Party ou need, fill it out, inwher the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). List All of Your PRIORITY Unsecured Claims List All of Your priority unsecured claims against you? Yes.	Schedule E/F: Creditors V	Vho Have Unsecured Clain	ns	12/15
1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes.	List the other party to any executory contracts or A/B: Property (Official Form 106A/B) and on Schedured creditors with partially secured claims that are list needed, copy the Part you need, fill it out, number any additional pages, write your name and case not be a secured contract.	unexpired leases that could result in a claim. Also lidule G: Executory Contracts and Unexpired Leases (ed in Schedule D: Creditors Who Have Claims Securathe entries in the boxes on the left. Attach the Continumber (if known).	st executory cor Official Form 10 red by Property.	ntracts on <i>Schedule</i> 6G). Do not include any If more space is
No. Go to Part 2. Yes. Yes. 2 List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, last much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, lift out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total claim				
Last 4 digits of account number \$ \$ \$ \$ \$ \$ \$	No. Go to Part 2. Yes. List all of your priority unsecured claims. If a ceach claim listed, identify what type of claim it is. It nonpriority amounts. As much as possible, list the unsecured claims, fill out the Continuation Page of	reditor has more than one priority unsecured claim, list the factaim has both priority and nonpriority amounts, list the claims in alphabetical order according to the creditor's national Part 1. If more than one creditor holds a particular claims.	at claim here and ame. If you have i, list the other cre	show both priority and more than two priority editors in Part 3.
Priority Creditor's Name When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Uniquidated Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 3 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Number Street As of the date you file, the claim is: Check all that apply Contingent Uniquidated Disputed Debtor 1 and Debtor 2 only Demonstic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify As of the date you file, the claim is: Check all that apply Contingent Uniquidated Uniquidated Uniquidated Uniquidated Disputed Type of PRIORITY unsecured claim: Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 3 and Debtor 2 only Debtor 4 and Debtor 2 only Debtor 4 and Debtor 2 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 1 only Debtor 1 only Debtor 1 and Debtor 2 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 6 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 6 only Debtor 7 only Debtor 6 only Debtor 8 only Debtor 9 only Debtor 1 only Debtor 1 only Debtor 6 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 6 only Debtor 8 only Debtor 8 only Debtor 9 only Debtor 9 only Debtor 9 only Debtor 1 only Debtor 1 only Debtor 6 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 6 only Debtor 8 only Debtor 9 only Debtor 9 only Debtor 9 only Debtor 9 only Debtor 1 only Debtor 1 only Debtor 9 only Debtor 1 only Debtor 9 only Debtor 1			i otal claim	
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As of the date you file, the claim is: Check all that apply Contingent Unliquidated Unliquidated Unliquidated Disputed Type of PRIORITY unsecured claim: Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? As of the date you file, the claim is: Check all that apply Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Other. Specify	Number Street	When was the dept incurred?		
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Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Other. Specify	·	· · ·		
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Other. Specify		□ Disputed		:
Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Other. Specify Other. Specify				
At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Other. Specify				:
Check if this claim is for a community debt Is the claim subject to offset? Other. Specify				
□ No	\square Check if this claim is for a community debt	intoxicated		
		Other. Specify		

Debtor 1

Partiff Your PRIORITY	/ Unsecured	Claims —	Continuation	Page
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Aft	er listing any entries on this page, number then	n beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonpriority amount
L			e.	*	•
	Priority Creditor's Name	Last 4 digits of account number	\$. \$	\$
	Number Street	When was the debt incurred?			
	Number Street	A 40 1. 8 0 1			
		As of the date you file, the claim is: Check all that apply.			
		Contingent			
	City State ZIP Code	Unliquidated Disputed			
	Who incurred the debt? Check one.	Disputed			
	Debtor 1 only	Type of PRIORITY unsecured claim:			
	Debtor 2 only	Domestic support obligations			
	Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government			
	At least one of the debtors and another	Claims for death or personal injury while you were			
	☐ Check if this claim is for a community debt	intoxicated Other, Specify			:
	Is the claim subject to offset?				
	□ No				
 ,	Yes	PROTESTION OF THE CONTROL OF THE CON			
]		Last 4 digits of account number	S	\$	S
	Priority Creditor's Name		-		
	Number Street	When was the debt incurred?			
		As of the date you file, the claim is: Check all that apply.			
	City State ZIP Code	Contingent			
	City State ZIP Code	Unliquidated Disputed			
	Who incurred the debt? Check one.	C Disputed			
	Debtor 1 only	Type of PRIORITY unsecured claim:			
	Debtor 2 only	Domestic support obligations			
	Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government			
	At least one of the debtors and another	Claims for death or personal injury while you were			
	Check if this claim is for a community debt	intoxicated			
		Other. Specify			
	Is the claim subject to offset?				
	□ No				
				Darry, March - Dr. African Control of Africa (Chile)	Describitation armoiten armoiten armosperit
		Last 4 digits of account number	\$	\$	\$
	Priority Creditor's Name	Last 4 digits of account number	Ψ	Ψ	Ψ
		When was the debt incurred?			
	Number Street				
		As of the date you file, the claim is: Check all that apply.			
		☐ Contingent			
	City State ZIP Code	Unliquidated			
	Who incurred the debt? Check one.	☐ Disputed			
	Debtor 1 only	Type of PRIORITY unsecured claim:			
	Debtor 2 only				
	Debtor 1 and Debtor 2 only	Domestic support obligations Taxes and certain other debts you owe the government			:
	At least one of the debtors and another	Claims for death or personal injury while you were			
	Check if this claim is for a community debt	intovingtad	retinado Adago a principa esta filmente Atamene a terra esta a terra de la composição de la composição de la c	entron-special deletities attentive the deep decer-	in encouraged extraors excesses to a submitted and a submitted as a submitted as a submitted as a submitted as
	Is the claim subject to offset?	-			
	□ No				
	□ Yes				

Doc 1 Filed 02/17/17 Entered 02/17/17 11:44:35 Page 27 of 52 Document Debtor 1 -1611/es List All of Your NONPRIORITY Unsecured Claims Part 29 3. Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. Total claim mont of Education Last 4 digits of account number 5 7 3 3400 Maryland Avenue 500 When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Who incurred the debt? Check one Unliquidated Debtor 1 only Disputed Debtor 2 only Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans Obligations arising out of a separation agreement or divorce ☐ Check if this claim is for a community debt that you did not report as priority claims Is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts ☐ No Other, Specify_ 2 Yes Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. City ZIP Code Contingent Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce Check if this claim is for a community debt that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other. Specify_ ☐ No Yes Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Cilv ZIP Code Contingent Who incurred the debt? Check one. Unliquidated Debtor 1 only Disputed Debtor 2 only Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts ☐ No Other. Specify_ Yes

Case 17-04629

Desc Main

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Debtor 1

Middle Name

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Your NONPRIORITY Unsecured Claims - Continuation Page

listing any entries on this page, number them beginning with	1 4.4, TOHOWED by 4.5, and so forth.	Total cla
	Last 4 digits of account number	\$
Nonpriority Creditor's Name	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
City State ZiP Code	Contingent	
Who incurred the debt? Check one.	Unliquidated	
	☐ Disputed	
☐ Debtor 1 only ☐ Debtor 2 only	Time of NOMPRIORITY was a series	
Debtor 2 only Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
s the claim subject to offset?	Other. Specify	
□ No □ Yes		
	Last 4 digits of account number	\$
ionpriority Creditor's Name	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent	
	☐ Unliquidated	
Who incurred the debt? Check one.	Disputed	
Debtor 1 only		
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Student loans	
	Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
s the claim subject to offset?	Other. Specify	
No Yes		
	Last 4 digits of account number	\$
Ionpriority Creditor's Name	When was the debt incurred?	
tumber Street	As of the date you file, the claim is: Check all that apply.	
sity State ZIP Code	Contingent	
Vho incurred the debt? Check one.	Unliquidated	
Debtor 1 only	Disputed	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only		
At least one of the debtors and another	Student loansObligations arising out of a separation agreement or divorce that	
Check if this staim is for a community data	you did not report as priority claims	
Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
s the claim subject to offset?] No	Other. Specify	

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Debtor 1

Part 3:

List Others to Be Notified About a Debt That You Already Listed

example, if a collection 2, then list the collection	u have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or a agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.
Name	On which entry in Part 1 or Part 2 did you list the original creditor?
Number Street	Line of (Check one): Part 1: Creditors with Priority Unsecured Claim Part 2: Creditors with Nonpriority Unsecured Co

			Line or (Check one). Grant 1. Creditors with Phonty Unsecured Claims
Number	Street		Part 2: Creditors with Nonpriority Unsecured Claims
			,
			Last 4 digits of account number
City		State ZIP Code	
	Te controlle a bene bene vene e ne e a le eve		
Name			On which entry in Part 1 or Part 2 did you list the original creditor?
			line of (Check and): [] Part 1: Creditors with Bright Unassured Claims
Number	Street		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
			Part 2: Creditors with Nonpriority Unsecured Claims
			Cidino
City		All Sub-A	Last 4 digits of account number
City	itti kara etinen esemilente en para ketteta ketti ente etiti eta eta enikerta eta	State ZIP Code	
			On which entry in Part 1 or Part 2 did you list the original creditor?
Name		**************************************	·
			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street		Part 2: Creditors with Nonpriority Unsecured
			Claims
			Look & digital of a annual mumban
City		State ZIP Code	Last 4 digits of account number
			On which entry in Part 1 or Part 2 did you list the original creditor?
Name			on which only his art torrait and you list the original deditor
			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street		☐ Part 2: Creditors with Nonpriority Unsecured
			Claims Claims
	·····		
City		State ZIP Code	Last 4 digits of account number
			e turi nanggarana na nggarana magagamaga ang an arang an magagapagang mga garang tanan ang garang an tumig arg
			On which entry in Part 1 or Part 2 did you list the original creditor?
Name			
		***************************************	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street		Part 2: Creditors with Nonpriority Unsecured
			Claims
			Last 4 digits of account number
City		State ZIP Code	
			On which entry in Part 1 or Part 2 did you list the original creditor?
Name			
			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street		Part 2: Creditors with Nonpriority Unsecured
			Claims
			I and A director of account or only
City	de businesses and see	State ZIP Code	Last 4 digits of account number
- and the second desirable and		нен менен менен (1986—1995), бълга с 19 год объект общест общест до учествення подат до учествення выполня выд	
Vame			On which entry in Part 1 or Part 2 did you list the original creditor?
			15 CO 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Number	Street		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
			Part 2: Creditors with Nonpriority Unsecured
			Claims
'ih.		Cinto 210.0-2	Last 4 digits of account number
City		State ZIP Code	The state of the s

Part 4:

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Debtor 1

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Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

Total claims from Part 1

- 6a. Domestic support obligations
- 6b. Taxes and certain other debts you owe the government
- 6c. Claims for death or personal injury while you were intoxicated
- 6d. Other. Add all other priority unsecured claims. Write that amount here.
- 6e. Total. Add lines 6a through 6d.

Total claim

- 6a.
- 6b.
- 6c.
- 6e.

Total claim

Total claims from Part 2

- 6f. Student loans
- 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority
- 6h. Debts to pension or profit-sharing plans, and other similar debts
- 6i. Other. Add all other nonpriority unsecured claims. Write that amount here.
- 6j. Total. Add lines 6f through 6i.

6f.

6g.

6h.

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.	II in this i					
	n-mathis-il	nformation to iden	mny your case.	T. 16		
De	ebtor	First Name	Middle Name	Last Name		
	ebtor 2 couse If filing)	First Name	Middle Name	JUMAN IUM	RES	
Ur	nited States	Bankruptcy Court for	the: Northern District o	fIllinois		
	ase number known)					Check if this is an amended filing
						-
Of	ficial F	orm 106G	mum			
Sc	chedi	ule G: Ex	ecutory Co	ntracts and	Unexpired Leases	12/15
info add	mation. I itional pay Do you h	f more space is no ges, write your na nave any executor theck this box and i	eeded, copy the addit me and case number y contracts or unexpi file this form with the co	cional page, fill it out, nu (if known). red leases? ourt with your other scheo	gether, both are equally responsible for sumber the entries, and attach it to this page dules. You have nothing else to report on this elisted on Schedule A/B: Property (Official Formatting Property)	e. On the top of any
2.	List sepa	rately each perso , rent, vehicle leas	n or company with w	hom you have the contr	ract or lease. Then state what each contra n in the instruction booklet for more example	ct or lease is for (for
	Person o	r company with w	hom you have the co	ntract or lease	State what the contract or lease	is for
2.1					•	
	Name				~	
	Number	Street			_	
					-	
 11 11	City	Secretary of the second secretary second	State ZIP Code		en e	ant at manny a naturu, matyari sa naturi na natur na natur na natur na
2.2	Name	······································				
	Number	Street		***	-	
		Oncor			-	
2.3	City		State ZIP Code		the state of the s	en arterioren arterioren erroren error
	Name				-	
	Number	Street				
	City		State ZIP Code			
2.4	City		State ZIP Code	eng manggan manggan sa manggan	e de la composition della comp	e transcente de la companya de la c
	Name					
	Number	Street				
	City	······································	State ZIP Code			
2.5			Julio Zif Oude	er en er		
	Name	<u></u>				
	Number	Street				
	City		State ZIP Code			

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Debtor 1	First Name	Middle Name	Last Name	Case number (if known)
	Additions	1 Dana 14 Va., 6		
			lave More Contracts or Le	ases
	on or compan	y with whom you	ı have the contract or lease	What the contract or lease is for
2 <u>2</u>				
Name		**************************************		WESTERFORD AND ADDRESS.
Numb	er Street	***************************************		
City		State	ZIP Code	
2				
Name				
Numb	er Street			
City		Λ1-1-	70.0-1-	, and the property of the following recovery
		State	ZIP Code	С 1888 г. н.
2				
Name				
Numb	er Street			
City		State	ZIP Code	- MANAGA-WASHington
	.,		* * * * * * * * * * * * * * * * * * * *	ti di propinsi di transi di mangana ma
<u> </u>				
Name				
Numb	er Street			West of the Control o
City		State	ZIP Code	
er er er en	erra a grapa y marayanya ayaa ayaa ayaa ayaa ay	e de la companya		The state of the s
<u>.</u>				
Name				
Numbe	er Street	**************************************	7-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	
City		State	ZIP Code	
	Sec. 1964 (1974), 1984, 1984, 1984, 1984, 1984, 1984, 1984, 1984, 1984, 1984, 1984, 1984, 1984, 1984, 1984, 19		entration and the second secon	tuuttaa keesta ka ka ta ka
Name				
Numbe	er Street		***************************************	
City		State	ZIP Code	48.00.00.00.00.00.00
	eren trer i minimusiki		the second of the second secon	en Service de la companya de la comp
Name	***************************************			Notice of the state of the stat
reame				
Numbe	er Street	· · · · · · · · · · · · · · · · · · ·		
City		State	ZIP Code	
		ers es a respectation of the con-		
Name				
Numbe	r Street			
City		State	ZIP Code	

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Fillun	this information to ident		-purposer (%) (%)		
Debtor	1 MICHAEL First Name	DÚMINIC Middle Name	Last Name		
Debtor (Spouse	2 NGATAGO , if filing) First Name	Widdle Name	JOADAN TORRES		
	States Bankruptcy Court for the		Illinois		
Case n					
(If know					Check if this is an
		•	•	a	mended filing
Offic	ial Form 106H	_			
Sch	edule H: You	ur Codebto	rs		12/15
are filing and nur case nu 1. Do 2. Wid	g together, both are equanber the entries in the base of the entries of the	ally responsible for soxes on the left. Attac revery question. ? (If you are filing a joing e you lived in a communication, New uisiana, Nevada, New mer spouse, or legal e	upplying correct information. ch the Additional Page to this page to this page to this page to the pag	y? (Community property states and territories in shington, and Wisconsin.)	l Page, fill it out, ite your name and
	Number Street				
	City	State	ZIP Code		
sho Sci Sci	own in line 2 again as a c	odebtor only if that p 06D), Schedule E/F (erson is a guarantor or cosigi Official Form 106E/F), or Schee	or if your spouse is filing with you. List the part Make sure you have listed the creditor of fulle G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you Check all schedules that apply:	n ,
3.1				Schedule D, line	:
N	ame			Schedule E/F, line	
N	umber Street	THE RESERVE THE PROPERTY OF TH		☐ Schedule G, line	
	ity	State	ZiP Code		
3.2					
N	ame			Schedule D, line	
Ni	umber Street			Schedule G, line	
Ci	tv	State	ZIP Code		
3.3	·	Siate	ZIF COde		
	ame			D Schedule D, line	;
Kł.	mhar Choot		***************************************	Schedule E/F, line	
Ni	umber Street			☐ Schedule G, line	
Ci	tv	State	ZIP Code		

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NSATUSE (YNN JOHNAN TORRE) Case number (# known)

Debtor 1

	Column 1:	Your codebtor			Column 2: The creditor to whom you owe the debt
	N N N.				Check all schedules that apply:
					Schedule D, line
	Name				Schedule E/F, line
	Number	Street			☐ Schedule G, line
1	City		State	ZIP Code	
]	Name				Schedule D, line
	Ivaille				☐ Schedule E/F, line
	Number	Street			Schedule G, line
	City		State	ZIP Code	
	Oily		State	2.31	· · · · ·
-	Name				Schedule D, line
					☐ Schedule E/F, line
	Number	Street			Schedule G, line
	City		State	ZIP Code	***************************************
		•	•		
]	Name				Schedule D, line
					☐ Schedule E/F, line
	Number	Street			Schedule G, line
	City		State	ZIP Code	and the state of t
	Name				Schedule D, line
					Schedule E/F, line
	Number	Street			GO TECUTE O, RIFE
	City		State	ZIP Code	
					Schedule D, line
	Name				Schedule E/F, line
	Number	Street			Schedule G, line
1	City		State	ZIP Code	
	Name				Schedule D, line
	Turne				☐ Schedule E/F, line
	Number	Street			Schedule G, line
	City		State	ZIP Code	
)	Ony		Cane		·
	Name				Schedule D, line
					Schedule E/F, line
	Number	Street			Schedule G, line

Fill in this information to identify	your case:					
Debtor 1 MICHAEL	0	Torcos				
Pirst Name Debtor 2 Noct+10	Middle Name	Last Name	205			
(Spouse, if filing) First Name	Middle Name	Last Name	<u>``````</u>			
United States Bankruptcy Court for the:	Northern District of Illinois					
Case number(If known)		•		Check if th	nis is: ended filing	
L					ended ning Ilement showing pos	tpetition chapter 13
Official Form 106I					as of the following	date:
Schedule I: You	- Ir İncome			MM / DI	D/YYYY	40/45
Be as complete and accurate as p supplying correct information. If y if you are separated and your spot separate sheet to this form. On the Part 1: Describe Employm	ossible. If two married pe ou are married and not fi use is not filing with you, e top of any additional pa	ling jointly, and y do not include in	our spouse formation	e is living with your spou	ou, include informationse. If more space is a	on about your spouse.
Fill in your employment information.		Debtor 1		No de la company	Debtor 2 or non-f	iling spouse
If you have more than one job, attach a separate page with information about additional employers.	Employment status	Employed Not employ	yed		☐ Employed Not employed	Art della discontini e rotatta i satti in manusia di satte satu qualità di satu giati di satu giati di satu gi
Include part-time, seasonal, or self-employed work.		mainla	. ~ ~			
Occupation may include student or homemaker, if it applies.	Occupation	mainte	ance.	;	· · · · · · · · · · · · · · · · · · ·	
	Employer's name	FairFie	ld In	<u> </u>	***************************************	
	Employer's address	Number Street	uverl	mat_	Number Street	
		Jolet	T ((_o t/ (3 1) IP Code	City	State ZIP Code
	How long employed the	ere? 3 mon	tho		***************************************	
Pari 2: Give Details About	Monthly Income					
Estimate monthly income as of spouse unless you are separated.	the date you file this for	n. If you have noth	ing to repor	t for any line, writ	e \$0 in the space. Incl	ıde your non-filing
If you or your non-filing spouse habelow, if you need more space, at	ve more than one employe	er, combine the info	ormation for	all employers for	that person on the line	es
			F	or Debtor 1	For Debtor 2 or non-filing spouse	
List monthly gross wages, sale deductions). If not paid monthly,			2. \$	3400.00		
3. Estimate and list monthly over	time pay.		3. +\$	0	+ \$ 0	
4. Calculate gross income. Add lin	ne 2 + line 3.		4. \$_3	3400.00	\$	

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Debtor 1	MIChael Dioyne 5	A Case number (# known)				
	Heather L Jordan-Torres		For Debtor 1	For Debtor 2 or		
Сор	y line 4 here	≯ 4.	\$ <u>2400.0</u> 0	non-filing spouse		
5. List	all payroll deductions:					
5a,	Tax, Medicare, and Social Security deductions	5a.	\$216.40	\$		
5b.	Mandatory contributions for retirement plans	5b.	\$	\$		
5c.	Voluntary contributions for retirement plans	5c.	s	\$		
5d.	Required repayments of retirement fund loans	5d.	\$ (*)	\$		
5e.	Insurance	5e.	\$79.04	\$		
5f.	Domestic support obligations	5f.	\$_ <u></u>	\$		
5 g .	Union dues	5g.	\$ <u> </u>	\$		
5h.	Other deductions. Specify:	5h.	+\$	+ \$		
6. Ad	d the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	6.	\$ 295,44	\$		
7. Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$3109.36	? \$		
8. List	all other income regularly received:					
8a.	Net income from rental property and from operating a business, profession, or farm					
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	\$		
8b.	Interest and dividends	8b.	\$ <u> </u>	\$		
8c.	Family support payments that you, a non-filing spouse, or a depende regularly receive	nt				
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	\$		
8d.	Unemployment compensation	8d.	\$ <u> </u>	\$		
8e.	Social Security	8e.	\$	s		
8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	ce 8f.	\$	\$		
8a.	Pension or retirement income	8g.	s ()	s ()		
	Other monthly income. Specify:	8h.	+• ()	+•		
	d all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$	\$		
	tulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$3,104.56+	<u>\$</u>	= \$2,104.56	
Inclu	e all other regular contributions to the expenses that you list in Scheoude contributions from an unmarried partner, members of your household, you'ds or relatives.			mates, and other		
Do r	not include any amounts already included in lines 2-10 or amounts that are	not a	vailable to pay expense		.0	
Spe	cify:		- Aller Nov. And	11. 1	\$	
Write	the amount in the last column of line 10 to the amount in line 11. The e that amount on the Summary of Your Assets and Liabilities and Certain S	tatist	ical Information, if it app	-	sallo4.56 Combined monthly income	
	you expect an increase or decrease within the year after you file this f	orm?				
	Yes. Explain:					

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Debtor 1 Michael Debtor 2 Hoatel (Spouse, if filing) First Name United States Bankruptcy Court for the Case number (If known)	Middle Name Middle Name Middle Name Last Name	A supp expens	nis is: ended filing element showing pos ses as of the followin	
Official Form 106J	•			
Schedule J: Yo	our Expenses			12/15
Be as complete and accurate as information. If more space is nee (if known). Answer every question Part 1: Describe Your Ho		ing together, both are equally r n. On the top of any additional	esponsible for supply pages, write your nam	ying correct ne and case number
1. Is this a joint case?	puseriojo			
No. Go to line 2. Yes. Does Debtor 2 live in a	separate household?			
— · · · -	file Official Form 106J-2, Expenses for S	Separate Household of Debtor 2.		
Do you have dependents? Do not list Debtor 1 and Debtor 2.	No Yes. Fill out this information for	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
Do not state the dependents' names.	each dependent	daughter		☐ No ❷ Yes
		<u>elaughter</u>	5	☐ No ☐ Yes ☐ Yes
Do your expenses include expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongo	No Yes Ping Monthly Expenses			
	r bankruptcy filing date unless you a nkruptcy is filed. If this is a suppleme			
	n-cash government assistance if you ed it on Schedule I: Your Income (Office		Your expe	nses
	expenses for your residence. Include	· ·	4. \$1000	Transference as forman and an analysis of the second
If not included in line 4:			-A	
4a. Real estate taxes			4a. \$ ()	W. O'L
4b. Property, homeowner's, or			4b. \$	
4c. Home maintenance, repair,4d. Homeowner's association of			4c. \$ ()	

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Case number (if known)___

	Heather Jordan-Torres		
			Your expenses
5.	Additional mortgage payments for your residence, such as home equity loans	5.	
6.	Utilities:		
	6a. Electricity, heat, natural gas	6a.	s 100 00
	6b. Water, sewer, garbage collection	6b.	s O
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	s 150 · 00
	6d. Other. Specify:	6d.	<u>\$</u>
7.	Food and housekeeping supplies	7.	300 00 E
8.	Childcare and children's education costs	8.	<u>s O</u>
9.	Clothing, laundry, and dry cleaning	9.	s 100.00
10.	Personal care products and services	10.	s 100.00
11.	Medical and dental expenses	11.	s_O
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$ 30 · OO
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	s 100 00
14.	Charitable contributions and religious donations	14.	\$
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a.	<u>\$</u>
	15b. Health insurance	15b.	\$
	15c. Vehicle insurance	15c.	\$ <u></u>
	15d. Other insurance, Specify:	15d.	\$
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	<u>\$</u>
17.	Installment or lease payments:		~
	17a. Car payments for Vehicle 1	17a.	\$
	17b. Car payments for Vehicle 2	17b.	\$
	17c. Other. Specify:	17c.	\$
	17d. Other. Specify:	17d.	\$
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	<u>\$</u>
19.	Other payments you make to support others who do not live with you.		
	Specify:	19.	<u>\$</u>
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income	.	
	20a. Mortgages on other property	20a.	s
	20b. Real estate taxes	20b.	<u>\$</u>
	20c. Property, homeowner's, or renter's insurance	20c.	\$
	20d. Maintenance, repair, and upkeep expenses	20d.	\$
	20e. Homeowner's association or condominium dues	20e.	s ()

Debtor 1

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Debtor 1 Michael D Torres First Name Middle Name Last Name	Case number (# known)
Heather Jordan-Tarres	
21. Other. Specify:	21. +\$
22. Calculate your monthly expenses.	
22a. Add lines 4 through 21.	22a. \$1880.00
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	22b. \$
22c. Add line 22a and 22b. The result is your monthly expenses.	22c. <u>\$1880.00</u>
23. Calculate your monthly net income.	01011 5/2
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$ 0 0 0 0
23b. Copy your monthly expenses from line 22c above.	23b 3 19 80,00
23c. Subtract your monthly expenses from your monthly income.	4200
The result is your monthly net income.	23c.
	a3c.aa6.56
24. Do you expect an increase or decrease in your expenses within the year after you fi	file this form?
For example, do you expect to finish paying for your car loan within the year or do you exp	cpect your
mortgage payment to increase or decrease because of a modification to the terms of your	ır mortgage?
웹 No.	
Yes Evoluin hara:	

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Fill in this information to identify your case:		
Debtor 1 Michael D Torces		
First Name Middle Name La Debtor 2 Noathor Scrolan-	asi Name	
(Spouse, if filing) First Name Middle Name La United States Bankruptcy Court for the: Northern District of Illinois	ast Name	
Case number		
(If known)		ck if this is an
	amer	nded filing
Official Form 106Dec		
Declaration About an Indi	vidual Debtor's Schedules	12/15
If two married people are filing together, both are equally re	esponsible for supplying correct information.	
obtaining money or property by fraud in connection with a livears, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attention to the property of the property o	bankruptcy case can result in fines up to \$250,000, or imprisonment for the second sec	r up to 20
Yes. Name of person	. Attach Bankruptcy Petition Preparer's Notice, Declaration, and	
Under penalty of perjury, I declare that I have read the su that they are true and correct. **Make D	1 410 150	
AS 15 10 AT	and Ind DAID	
Date A I (d U) MM / DD YYYY	Date Uct (OC / MM / DD / LYYYY	

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Fill in this information to identify your case:			
Debtor 1 Michael D. Toli	Last Name		
Debtor 2 Spouse, if filing) First Name Middle Name	1 - TOY (Q Last Name	5	
United States Bankruptcy Court for the: Northern District of Ill	linois		
Case number (if known)			Check if this is an
			amended filing
000:15 407			
Official Form 107 Statement of Financial Affairs	e for Indivi	iduals Filing for Rankruntev	7 04/16
Be as complete and accurate as possible. If two marrie information. If more space is needed, attach a separate number (if known). Answer every question.	d people are filing	together, both are equally responsible for supplying	ng correct
Part 1: Give Details About Your Marital State	us and Where Yo	u Lived Before	
What is your current marital status?			
Married			
☐ Not married			
2. During the last 3 years, have you lived anywhere on No Yes. List all of the places you lived in the last 3 ye Debtor 1:	-		Dates Debtor 2 lived there
		Same as Debtor 1	Same as Debtor 1
208 W Wapella	From 51119		From
Number Street '	To 23/6	Number Street	То
minooka II 40447			
City State ZIP Code		City State ZIP Code	
		Same as Debtor 1	Same as Debtor 1
Number Street	From	Number Street	From
	T Q		10
City State ZIP Code		City State ZIP Code	
3. Within the last 8 years, did you ever live with a spo	ouse or legal equiv		Community property
states and territories include Arizona, California, Idaho			
	,		Wisconsin.)
Yes. Make sure you fill out Schedule H: Your Code		106H).	Wisconsin.)
		i 106H).	Wisconsin.)

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Debtor 1	1	Name	Case nu	imber (il known)	
	meather Jordo	an-Tornes			
Filli	you have any income from employment n the total amount of income you receive u are filing a joint case and you have inco	d from all jobs and all busi	inesses, including part-ti	me activities.	endar years?
	No Yes. Fill in the details.				
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	From January 1 of current year until the date you filed for bankruptcy:	Wages, commissions, bonuses, tips Operating a business	\$3,600 CC	Wages, commissions, bonuses, tips Operating a business	<u>\$</u>
	For last calendar year: (January 1 to December 31, 2016)	Wages, commissions, bonuses, tips Operating a business	<u>\$ 18000.00</u>	Wages, commissions, bonuses, tips Operating a business	\$
	For the calendar year before that: (January 1 to December 31,	Wages, commissions, bonuses, tips Operating a business	<u>\$ 17000,00</u>	Wages, commissions, bonuses, tips Operating a business	\$
gami	· -	a joint case and you have	e income that you receive	ed together, list it only once	under Debtor 1.
∟ Y	es. Fill in the details.			i you listed in line 4.	
		Debtor 1		Debtor 2	
		Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)		Gross income from each source (before deductions and exclusions)
	From January 1 of current year until the date you filed for bankruptcy:	Sources of income Describe below.	each source (before deductions and	Debtor 2 Sources of income	each source (before deductions and
	From January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31,	Sources of income Describe below.	(before deductions and exclusions)	Debtor 2 Sources of income	each source (before deductions and

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btor 1	MICHAEL D	TOYCQ5		Case	number (# known)	
	Heather Jo	rdan-To	S save			
Part 3:	List Certain Payments Y	ou Made Befor	e You Filed	for Bankruptcy		
. Are eitl	her Debtor 1's or Debtor 2's o	lebts primarily co	onsumer deb	ts?		
☐ No.	Neither Debtor 1 nor Debto "Incurred by an individual prir	r 2 has primarily narily for a person	consumer de	ebts. Consumer debts a	re defined in 11 U.S.C. § 10	1(8) as
	During the 90 days before yo			• •	\$6,425* or more?	
	☐ No. Go to line 7.					
	Yes. List below each cred total amount you pai	d that creditor. Do	not include p	\$6,425* or more in one ayments for domestic sinents to an attorney for	upport obligations, such as	
	* Subject to adjustment on 4/					
Yes	s. Debtor 1 or Debtor 2 or bot	h have primarily o	consumer de	bts.		
	During the 90 days before yo				\$600 or more?	
	No. Go to line 7.					
	Yes. List below each cred creditor. Do not inclualimony. Also, do no	de payments for c	domestic supp	\$600 or more and the to out obligations, such as by for this bankruptcy ca	child support and	
			Dates of payment	Total amount paid	Amount you still owe	Was this payment for
	Creditor's Name			\$	\$	☐ Mortgage
	стесны в мате					☐ Car
	Number Street					Credit card
						Loan repayment
						☐ Suppliers or vendors
	City State	ZIP Code				Other
	Creditor's Name			\$	\$	☐ Mortgage
	Cledini 9 14dille					Car
	Number Street					Credit card
						Loan repayment
	***************************************					Suppliers or vendors
	City State	ZIP Code				Other
				\$	<u> \$ </u>	☐ Mortgage
	Creditor's Name					Car
	Number Street	***************************************				Credit card
	HAMIDOI VIEGO					Loan repayment
			-			Suppliers or vendors
	City State	ZIP Code				Other
	Side Side	auer WUUG				

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or 1 MIChael D Torce	5	NAME OF THE PROPERTY OF THE PR	Case number (if known)
Heather Jordan-T	OVIRS			
Within 1 year before you filed for bankruptcy, did y Insiders include your relatives; any general partners; r corporations of which you are an officer, director, pers agent, including one for a business you operate as a s such as child support and alimony.	relatives of any son in control, or	general partners; _I r owner of 20% or	partnerships of which more of their voting	ch you are a general partner; g securities; and any managing
Yes. List all payments to an insider.	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
Insider's Name		\$	\$	
Number Street	-			
City State ZIP Code				
fnsider's Name	,	\$. \$	
Number Street	-			
City State ZIP Code				
Vithin 1 year before you filed for bankruptcy, did you insider? Include payments on debts guaranteed or cosigned by Include Payments on debts guaranteed or cosigned by Include Payments that benefited an insider.	/ an insider.			
	Dates of payment	Total amount paid	-	Reason for this payment Include creditor's name
Insider's Name	 	\$	\$	
Number Street				
City State ZIP Code				
Insider's Name	***************************************	\$	\$	
Number Street				

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ır 1	First Name Middle Name Last Name	<u>^25</u>	Case number (# known)	
	Mather Jordan	- Torres		
irt 4:			_	
	n 1 year before you filed for bankruptcy, w			proceeding?
st al	Il such matters, including personal injury case ontract disputes.	s, small claims actions, di	vorces, collection suits, paternity actions	, support or custody modifie
No	·			
	es. Fill in the details.			
	Nati	ure of the case	Court or agency	Status of the ca
			Cornadican	100
C	Case title <u>PVic+IDND</u>		Court Name	- Santa
			lle Washingto	On appeal
_	Case number $2016 - LM - 175$		~	
C	ase number exerce		morcus II WC	2421
С	case title		Court Name	Pending
				On appeal
			Number Street	☐ Concluded
С	ase number		City State ZIP Code	
		Describe the property	Date	Value of the prope
		and the property		value of the proper
	Creditor's Name			<u> </u>

	Number Street	Explain what happene	ed	
		Property was re		
		Property was fo		
	City State ZIP Code	Property was ga	arnished. tached, seized, or levied.	
	ony and a second	Describe the property		
		besome the property	Date	Value of the prope
				\$
	Creditor's Name		· · · · · · · · · · · · · · · · · · ·	**************************************
	Number Street	Explain what happene	d	
		Property was re	possessed.	
		Property was for		
	City State ZIP Code	Property was ga		
		Property was att	tached, seized, or levied.	

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thin 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from you counts or refuse to make a payment because you owed a debt? No I Yes. Fill in the details. Describe the action the creditor took Data action was taken Creditor's New Number Street Security Steiner Security Steine	i	le Name Cast I	(L) Case number (if known)		
Describe the action the creditor took Possoribe the action the creditor took Date action Was ballen Describe the action the creditor took Date action Describe the action Describe the passession of an assignee for the benefit of action action action to the passession of an assignee for the benefit of action	neather	- Jordan	n-Torres		
Pescribe the action the creditor took Date action was taken Amount was taken Since ZIP Code Last 4 digits of account number: XXXX— Tithin 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of editors, a court-appointed receiver, a custodian, or another official? No Yes Last Certain Gifts and Contributions thin 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave the gift S Nomber Street Dates you gave the gift suits a total value of more than \$600 Describe the gifts S Nomber Street Number Street Number Street Number Street Number Street					
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Pescribe the action the creditor took Date action Wes taken Amount Wes taken Size	counts or refuse to ma	ake a payment bec	cause you owed a debt?	•	•
Describe the action the creditor took was faken Amount was faken w	l No				
Cerebra's Name Number Steet Ste	Yes. Fill in the details.				
Cerebra's Name Number Steet Ste					ing the state of t
City State ZBP Code Last 4 digits of account number: XXXXX—			Describe the action the creditor took		Amount
City State ZIP Code Last 4 digits of account number: XXXXX— sithin 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of editors, a court-appointed receiver, a custodian, or another official? No Yes List Certain Gifts and Contributions State Certain Gifts and Contributions List Certain Gifts and Contributions State Certain Gifts and Contributions List Certain Gifts and Contributions State Certain Gifts and Contributions State 2 Dates you gave the gift State 2 Dates you gave the gifts State 2 Dates you gave the gift State 3 Dates you gave the gift Dates you gave the gift Dates you gave the gift Dates yo	Creditor's Name				
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Person's relationship to you Gifts with a total value of more than \$600 per person	per person Person to Whom You Gave the		Describe the gifts	Dates you gave the gifts	\text{Value} \$
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per person the gifts Person to Whom You Gave the Gift Number Street	Person to Whom You Gave the Number Street	State ZIP Code		Dates you gave the gifts	\text{Value} \$
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	Person to Whom You Gave the Number Street City Person's relationship to you Gifts with a total value of per person	State ZIP Code		Dates you gave	\$\$
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	First Name Middle Nar	me	Last Name	Cas	se number (# ĸnown)		***************************************
	Heather	Jor	dan-Torres				
ithi	in 2 years before you fil	led for ba	ınkruptcy, did you give	any gifts or contributions	with a total valu	e of more than \$6	00 to any charity?
ŀΝ							• •
ÌΥ	es. Fill in the details for ϵ	each gift c	or contribution.				
	Gifts or contributions to cl that total more than \$600	harities	Describe what yo	ou contributed		Date you contributed	Value
Ĉ	harity's Name	·	1000				\$
							¢
			THE PARTY OF THE P				Ψ
Ni	umber Street		-				
Ci	ity State ZIP Coo	de					
6:	List Certain Loss	es					
	Describe the property you			urance coverage for the loss		Date of your loss	Value of property
1	how the loss occurred		Include the amour claims on line 33 o	nt that insurance has paid. List p of Schedule A/B: Property.	ending insurance		lost
1	how the loss occurred		Include the amour claims on line 33 o	nt that insurance has paid. List p of <i>Schedule A/B: Property</i>	ending insurance		lost \$
ı	how the loss occurred		Include the amour claims on line 33 o	nt that insurance has paid. List pof Schedule A/B: Property.	ending insurance		\$
			claims on line 33 c	nt that insurance has paid. List poil of Schedule A/B: Property.	ending insurance		\$
7:	List Certain Paymo		claims on line 33 o	of Schedule A/B: Property.			\$
7a thiu c	List Certain Paymon 1 year before you file consulted about seeking	d for ban g bankruj	Claims on line 33 of the control of	of Schedule A/B: Property. yone else acting on your bekruptcy petition?	ehalf pay or trans	sfer any property	\$
7a thiu c	List Certain Paymon 1 year before you file consulted about seeking	d for ban g bankruj	Claims on line 33 of the control of	of Schedule A/B: Property.	ehalf pay or trans	sfer any property	\$
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	First Name Middle Name Last Neather Jordo	in-Torres			
premo	от на применя в на применя на при	Description and value of any prope	rty transferred	Date payment or transfer was made	Amount of payment
Ê	Person Who Was Paid				
1	lumber Street			***************************************	\$
				TOTAL TO STORE THE TOTAL PARAMETERS	\$
C	ity State ZIP Code				
Ē	mail or website address	va.			
P	erson Who Made the Payment, if Not You				
No Ye	s. Fill in the details.				
1 16	s. Fit in the details.	Description and value of any propel	ty transferred	Date payment or	Amount of pay
Ē	erson Who Was Paid			transfer was made	in the two days and a
•	CIDON FRIO VIGA I AIG				
					æ
Ā	lumber Street				\$
					\$ \$
- c	ity State ZIP Code	otcy, did you sell, trade, or otherwi	se transfer any propert	y to anyone, other tha	\$s
ithir ansf clude o not No	State ZIP Code 2 years before you filed for bankrup Berred in the ordinary course of your le be both outright transfers and transfers in include gifts and transfers that you have	business or financial affairs? nade as security (such as the grantin			
ithir ansf clude o not	State ZIP Code 2 years before you filed for bankrup erred in the ordinary course of your le both outright transfers and transfers n include gifts and transfers that you have	business or financial affairs? nade as security (such as the grantin	g of a security interest or Describe any proper or debts paid in excl	mortgage on your pro ty or payments received	perty).
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cithir ansficlude o not No No Ye	State ZIP Code 2 years before you filed for bankrup erred in the ordinary course of your le both outright transfers and transfers in include gifts and transfers that you have s. Fill in the details.	business or financial affairs? nade as security (such as the grantin re already listed on this statement. Description and value of property	g of a security interest or Describe any proper or debts paid in excl	mortgage on your pro ty or payments received	perty). Date transf
āthir ansfelude o not No Ye	State ZIP Code 2 years before you filed for bankrup erred in the ordinary course of your le both outright transfers and transfers in include gifts and transfers that you have s. Fill in the details.	business or financial affairs? nade as security (such as the grantin re already listed on this statement. Description and value of property	g of a security interest or Describe any proper or debts paid in excl	mortgage on your pro ty or payments received	perty). Date transf
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To The Telephone	State ZIP Code 2 years before you filed for bankrup erred in the ordinary course of your le both outright transfers and transfers in include gifts and transfers that you have s. Fill in the details.	business or financial affairs? nade as security (such as the grantin re already listed on this statement. Description and value of property	g of a security interest or Describe any proper or debts paid in exch	mortgage on your pro ty or payments received	perty). Date transf was made
ithir ithir ithir indicated onol No No No No No No No No No No No No No	a 2 years before you filed for bankrup erred in the ordinary course of your le be both outright transfers and transfers in include gifts and transfers that you have s. Fill in the details. erson Who Received Transfer umber Street Ty State ZIP Code erson's relationship to you	business or financial affairs? nade as security (such as the grantin re already listed on this statement. Description and value of property	g of a security interest or Describe any proper or debts paid in exch	mortgage on your pro	perty). Date transf was made
ithir ithir ithir indicated onol No No No No No No No No No No No No No	State ZIP Code 2 years before you filed for bankrup erred in the ordinary course of your le both outright transfers and transfers in include gifts and transfers that you have s. Fill in the details. Person Who Received Transfer Timber Street Type State ZIP Code	business or financial affairs? nade as security (such as the grantin re already listed on this statement. Description and value of property	g of a security interest or Describe any proper or debts paid in exch	mortgage on your pro	perty). Date transf was made
Tithir ansficude o not on the original of the original origi	a 2 years before you filed for bankrup erred in the ordinary course of your le be both outright transfers and transfers in include gifts and transfers that you have s. Fill in the details. erson Who Received Transfer umber Street Ty State ZIP Code erson's relationship to you	business or financial affairs? nade as security (such as the grantin re already listed on this statement. Description and value of property	g of a security interest or Describe any proper or debts paid in exch	mortgage on your pro	perty). Date transf

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	· ·	Last Name			
	meather Jore	dan-Torres			
	10 years before you filed for bank eneficiary? (These are often called	kruptcy, did you transfer any prope d asset-protection devices.)	ty to a self-settled tru:	st or similar device of v	vhich you
No No	• •	,			
	s. Fill in the details.				
		Description and value of the prope		See Charles	Date transfer
		pescription and talde of the prope	ity nansierieu		was made
Nan	ne of trust	PARPER MAINTAIN			
					•

	ere particular de la come de la comercia del la comercia de la comercia de la comercia de la comercia del la com	artintamentajan kata kama kelalah Saramat intelempterbat kata sakara terbekan intelempetati at arti artintamen		derm I monthly charles are but to be a be from the dermit of the but of the b	
8.	List Certain Financial Accou	nts, Instruments, Safe Deposit	Boxes, and Storag	e Units	
Vithin	1 year before you filed for bankru	uptcy, were any financial accounts o	or instruments held in	your name, or for your	benefit,
	, sold, moved, or transferred?				
		et, or other financial accounts; cert	•	ares in banks, credit un	ions,
roker. No	age houses, pension funds, coop	peratives, associations, and other fi	iancial institutions.		
	s. Fill in the details.				
	•	Last 4 digits of account number	Type of account or	Date account was	Last balance befo
		man - migrae w. man and profit	instrument	closed, sold, moved,	closing or transfe
				or transferred	
Na	me of Financial Institution		☐ Checking	or transferred	\$
	me of Financial Institution	XXXX	Checking Savings	or transferred	s
		xxxx	Savings Money market	or transferred	\$
Nu	mber Street	xxxx	Savings Money market Brokerage	or transferred	\$
	mber Street	xxxx	Savings Money market	or transferred	\$
Nu	mber Street		Savings Money market Brokerage Other	or transferred	\$
Nu	mber Street	xxxx	Savings Money market Brokerage Other Checking	or transferred	\$ \$
Nu Cit	mber Street y State ZIP Code		Savings Money market Brokerage Other Checking Savings	or transferred	\$ \$
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Nu Cit	y State ZIP Code		Savings Money market Brokerage Other Checking Savings Money market	or transferred	\$ \$

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ebtor 1	First Name Middle Name La	st Name Torres	Case number (# known)	
	Heather Jordo	in- Torres		
		or place other than your home w	thin 1 year before you filed for bankruptcy?	
	·			
1	Yes. Fill in the details.	Who else has or had access to it?	Describe the contents	Do you still
		Wild else has of had access to it.	bestille the contents	have it?
				□ No
	Name of Storage Facility	Name	<u> </u>	Yes
	Number Street	Number Street		
		***************************************	TO CALLY SEA OF THE STATE OF TH	
		City State ZIP Code		
	City State ZIP Code			
Part 9	Identify Property You Hold	or Control for Someone Else		
23. Do	you hold or control any property that	someone else owns? Include any	property you borrowed from, are storing for,	
	nold in trust for someone.			

	Yes. Fill in the details.		<u> </u>	·
		Where is the property?	Describe the property	Value
	Owner's Name			\$
	Number Count	Number Street	(MATERIAL PROPERTY AND ADMINISTRATION OF THE PROPER	
	Number Street			
	City State ZIP Code	City State Z	P Code	
Part 1	Give Details About Environ	mantal information		
	0.0000000000000000000000000000000000000			
or the	purpose of Part 10, the following def	initions apply:		
haz	- · · · · · · · · · · · · · · · · · · ·	or material into the air, land, soil, s	oncerning pollution, contamination, releases of surface water, groundwater, or other medium, es, wastes, or material.	of
	e means any location, facility, or prope ize it or used to own, operate, or utiliz	-	nental law, whether you now own, operate, or	
			andaria irrata hanandaria aribatanan tavia	
	<i>tardous material</i> means anything an el estance, hazardous material, pollutant,		ardous waste, hazardous substance, toxic	
		•	of the desired	
•	all notices, releases, and proceeding		•	
4. rias	any governmental unit notined you th	iat you may be hable or potentially	liable under or in violation of an environment	ai iäW f
	Yes. Fill in the details.			
		Governmental unit	Environmental law, if you know it	Date of notice
	Name of site	Governmental unit		
	reame of Site	COrdination and		
•	Number Street	Number Street	-	
			<u>-</u>	
		City State ZIP Code		
	City State ZIP Code			

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	First Name Middle Name Last	Name	Case number	(if Known)	***************************************
	Heather Jordan	n-Toraes			
ave	you notified any governmental unit of	f any release of hazardous materi	ai?		
N	lo				
] Y	es. Fill in the details.				
		Governmental unit	Environmental lav	w, if you know it	Date of notice
•	Name of site	Governmental unit			Markle 100 februarium der dem februarium dem
Ĭ	Number Street	Number Street			
		City State ZIP Code			
č	City State ZIP Code				
ave '	you been a party in any judicial or ad	ministrative proceeding under an	environmental la	w? Include settle	ments and orders.
a No			,		
) Ye	es. Fill in the details.				
		Court or agency	Nature of the	case	Status of the case
Cr	ase title				
		Court Name	_		Pending
			with the state of		On appe
		Number Street			Conclud
Ca	ase number	City State ZIP Cod			
rice.		iness or Connections to Any			
/ithir	n 4 years before you filed for bankrup A sole proprietor or self-employed i A member of a limited liability comp A partner in a partnership	tcy, did you own a business or ha in a trade, profession, or other act pany (LLC) or limited liability partn	ive any of the folic		s to any business?
: 11: //ithir	n 4 years before you filed for bankrup A sole proprietor or self-employed i A member of a limited liability comp	tcy, did you own a business or ha in a trade, profession, or other act pany (LLC) or limited liability partn	ive any of the folic		s to any business?
/itthir	n 4 years before you filed for bankrup A sole proprietor or self-employed i A member of a limited liability comp A partner in a partnership	tcy, did you own a business or hain a trade, profession, or other act oany (LLC) or limited liability partriculative of a corporation	ive any of the folic ivity, either full-tin ership (LLP)		s to any business?
: 14: //ithir	n 4 years before you filed for bankrup A sole proprietor or self-employed i A member of a limited liability comp A partner in a partnership An officer, director, or managing ex	tcy, did you own a business or ha in a trade, profession, or other act pany (LLC) or limited liability partr ecutive of a corporation g or equity securities of a corpora	ive any of the folic ivity, either full-tin ership (LLP)		s to any business?
: 111:	n 4 years before you filed for bankrup A sole proprietor or self-employed i A member of a limited liability comp A partner in a partnership An officer, director, or managing ex An owner of at least 5% of the voting	tcy, did you own a business or hain a trade, profession, or other act oany (LLC) or limited liability partrecutive of a corporation g or equity securities of a corporart 12.	ive any of the folic ivity, either full-tin ership (LLP) ition		s to any business?
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/ithiring	A sole proprietor or self-employed in A sole proprietor or self-employed in A member of a limited liability comparts. A partner in a partnership in An officer, director, or managing extended in A nowner of at least 5% of the voting of the above applies. Go to Pages. Check all that apply above and fill in Business Name Number Street State ZIP Code	tcy, did you own a business or hain a trade, profession, or other actiony (LLC) or limited liability partnecutive of a corporation g or equity securities of a corporation art 12. In the details below for each businessibe the nature of the business.	ive any of the folic ivity, either full-tinership (LLP) ition	Employer Identific Do not include Soc EIN: Dates business ex From Employer Identification	ation number cial Security number or ITIN. disted To ation number cial Security number or ITIN.

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	Michael U 10 mes Case number (# known) First Name Middle Name Last Name Heather Jordan - Torces					
	reamer Cordan - 101125					
		Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.			
	Business Name					
	Number Street		EIN:			
	Mullimer Street	Name of accountant or bookkeeper	Dates business existed			
			From To			
	City State ZIP Code		From 10			
#:41	hin 3 years hefere you filed for hankrum	tcy, did you give a financial statement to anyone abo	out your business? Include all financial			
	nin 2 years before you filed for bankrup: itutions, creditors, or other parties.	ccy, did you give a financial statement to anyone abo	out your business? Include an imalicial			
	No					
	Yes. Fill in the details below.					
		Date issued				
		And				
	Name	MM / DD / YYYY				
	Number Street					
	City State ZIP Code					
	Sien Palew					
	2: Sign Below					
l h	ave read the answers on this Statement	of Financial Affairs and any attachments, and I dec	lare under penalty of perjury that the			
an in	swers are true and correct. I understan- connection with a bankruptcy case can	d that making a false statement, concealing property result in fines up to \$250,000, or imprisonment for i	y, or obtaining money or property by fraud up to 20 years, or both.			
18	U.S.C. §§ 152, 1341, 1519, and 3571.	1				
	, , , , (
×	: Muchalo V	- * Hea tucko	law-lows			
	Signature of Debtor 1	Signature of Debtor 2				
	Date 02 17 2017	2017/2017				
		Date <mark>⊠ (<i>OO</i> /</mark> tatement of Financial Affairs for Individuals Filing fo	or Bankruntey (Official Form 107)?			
ص از ان		tatement of Financial Analis for individuals Filing Id	and a serious			
85	No					
	Yes					
	d you nay or agree to nay someone who	is not an attorney to help you fill out hankruptey fo	rms?			
		is not an attorney to help you fill out bankruptcy fo	rms?			
	d you pay or agree to pay someone who No Yes. Name of person	. Attach	rms? the Bankruptcy Petition Preparer's Notice, ration, and Signature (Official Form 119).			